PTC/SB/06 (07-06)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/038,353			ing Date 04/2002	☐ To be Mailed	
	AF	AS FILE	SMALL	ENTITY 🛛	OR		HER THAN ALL ENTITY						
	FOR	N	NUMBER FILED		(Column 2) NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), o		N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p), o		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(I))		20 minus 20 =		• 0			x \$9 =	0	OR	x \$ =		
	EPENDENT CLAIM CFR 1.16(h))		2 minus 3 =		• 0			X \$42 =	0		x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G) a			pplication size fee due Il entity) for each r fraction thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL	0		TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	01/16/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIO PAID F	R DUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18(i))	20	Minus	~ 20		= 0		X \$25 =	0	OR	x \$ =		
	Independent (37 CFR 1.16(h))	• 2	Minus	···10		= 0		X \$100 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						ı			OR			
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	·	
4-6-07 (Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 8	Minus	** . *	20	=		x \$ =		OR	x s =		
	Independent (37 CFR 1.18(h))	· 6	Minus	***	10			x \$ =		OR	xs =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.								TOTAL ADD'L FEE	etrument Ex	OR (amin	TOTAL ADD'L FEE		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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